## Agency Tracking ID:PGC2210377 Authorization Number:09554Z Successful Authorization -- Date Paid: 10/3/12 FILE COPY ONLY!!

CAREFULLY BEFORE	FEDERAL COMMUNICATION		APPROVED BY ON 3060-0
PROCEEDING	REMITTANCE		500 3000 00
	FORM 15: PAGE NO 1 OF		SPECIAL USE
(1) LOCKBOX # <b>979089</b>	111111111111111111111111111111111111111		FCC USE ONLY
			FCC USE ONLY
	SECTION A - I	Payer Information	
(2) PAYER NAME (if paying by credit	t card, enter name exactly as it appears on you	ır card)	(3) TOTAL AMOUNT PAID (dollars and cents)
Davis Wright Tremaine LLI			\$1355.00
(4) STREET ADDRESS LINE NO. 1			
1919 Pennsylvania Ave. N.W	V		
(5) STREET ADDRESS LINE NO. 2			
Suite 800			
(6) CITY		(7) ST/	1.00
Washington		DC	20006-3402
(9) DAYTIME TELEPHONE NUMBE	R (INCLUDING AREA CODE)		DDE (IF NOT IN U.S.A.)
202-9734200		US	
O TOTAL TOTA	EGISTRATION NUMBER (FRN) AND TA	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	R (TIN) REQUIRED
(11) PA YER (FRN)		(12) FCC USE ONLY	
0004063681	AND MARK AND THE ADDITIONED NA	AN . DE DIEDEDENE COMP	The appearance of
IF PA	YER NAME AND THE APPLICANT NAME	ME ARE DIFFERENT, COMP	LETE SECTION B
	IF MORE THAN ONE APPLICANT, USE	CONTINUATION SHEETS (I	ORM 159-C)
(13) APPLICANT NAME	IF MORE THAN ONE APPLICANT, USE	E CONTINUATION SHEETS (I	ORM 159-C)
(13) APPLICANT NAME Comcast Cable Communica	VA-00 10 10 10 10 10 10 10 10 10 10 10 10 1	E CONTINUATION SHEETS (I	ORM 159-C)
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(13) APPLICANT NAME Comcast Cable Communical (14) STREET ADDRESS LINE NO. 1 One Comcast Center	VA-00 10 10 10 10 10 10 10 10 10 10 10 10 1	CONTINUATION SHEETS (I	ORM 159-C)
(13) APPLICANT NAME Comcast Cable Communical (14) STREET ADDRESS LINE NO. 1 One Comcast Center (15) STREET ADDRESS LINE NO. 2	tions, LLC	CONTINUATION SHEETS (I	ORM 159-C)
(13) APPLICANT NAME Comcast Cable Communical (14) STREET ADDRESS LINE NO. 1 One Comcast Center	tions, LLC	(17) STA	
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(13) APPLICANT NAME Comcast Cable Communical (14) STREET ADDRESS LINE NO. 1 One Comcast Center (15) STREET ADDRESS LINE NO. 2 1701 John F. Kennedy Bould (16) CITY Philadelphia (19) DAYTIME TELEPHONE NUMBI 215-2861700	tions, LLC	(17) STA PA (20) COUNTRY CO US	TE (18) ZIP CODE 19103-2838 DE (IF NOT IN U.S.A.)
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## **Payment Confirmation**

Your transaction has been approved. For your records, please note the following:

**AGENCY TRACKING ID: AUTHORIZATION NUMBER:** 

**AMOUNT PAID:** 

PRINT FORM 159

PGC2210377

09554Z

\$1,355.00

CLOSE

**Customer Service** 

**FCC Fees** 

Web Policies / Privacy **Policy** 

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If you have any questions or concerns please contact your licensing system help desk.